

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE



Applicants: Daniel R. Salomon and Donald V. Cramer
Application No.: 10/006,562 Filed date: December 5, 2001
Confirmation No.: 2653 Group: 1653
Examiner: Abdel A. Mohamed
For: Composition and Method for Treating Chronic Allograft Rejection

CERTIFICATE OF MAILING	
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as First Class Mail in an envelope addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450	
on	3/30/04
Date	Signature
Mary Anza	
Typed or printed name of person signing certificate	

AMENDMENT

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

This Amendment is being filed in response to the Office Action ("the Office Action") mailed from the U.S. Patent and Trademark Office on January 29, 2004 in the above-identified application. Reconsideration and further examination are requested.

Amendments to the specification begin on page 2.

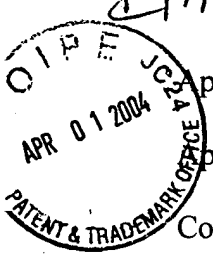
The listing of claims begins on page 4.

Remarks begin on page 9.

Please amend the application as follows:

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

1653/8



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on <u>3/30/04</u> Date	<u>Mary Anza</u> Signature
<u>MARY ANZA</u> Typed or printed name of person signing certificate	

Amendment and Fee Transmittal

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment for filing in the above-identified application.

- ☐ Small entity status of this application under 37 C.F.R. 1.9 and 1.27 has been established by a Small Entity Statement previously submitted.
- ☐ A Small Entity Statement to establish small entity status under 37 C.F.R. 1.9 and 1.27 is enclosed.

The fee has been calculated as shown below:

(COL. 1)		(COL. 2)		(COL. 3)	SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDIT. FEE		RATE	ADDIT. FEE
TOTAL	36	MINUS	36	0	X \$9	\$	X	\$18	\$0.00
INDEP	4	MINUS	4	0	X \$43	\$	X	\$86	\$0.00
FIRST PRESENTATION OF MULTIPLE DEP. CLAIM					+ \$145	\$	+	\$290	\$
					TOTAL =	\$ 0	TOTAL =	\$ 0.00	

* not fewer than 20
** not fewer than 3

Please charge Deposit Account No. 50-1935 for the following fees:

<input type="checkbox"/>	Petition for [] month Extension of Time	\$ _____
<input type="checkbox"/>	Amendment Fee	\$ _____
<input type="checkbox"/>	Other Fees:	\$ _____
	_____	\$ _____
	_____	\$ _____
	TOTAL:	\$ <u>0</u>

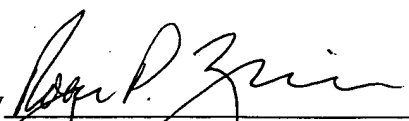
A check is enclosed in payment of the following fees:

<input type="checkbox"/>	Petition for [] month Extension of Time	\$ _____
<input type="checkbox"/>	Amendment Fee	\$ _____
<input checked="" type="checkbox"/>	Other Fees:	
	Fee under 37 CFR 1.17(p)	\$ 180.00
	_____	\$ _____
	TOTAL:	\$ <u>180.00</u>

☒ A general authorization is hereby granted to charge Deposit Account No. 50-1935 for any fees required under 37 C.F.R. 1.16 and 1.17 in order to maintain pendency of this application. A copy of this authorization is enclosed for accounting purposes.

Respectfully submitted,

BOWDITCH & DEWEY, LLP

By 
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